



REGIONAL PARTNERSHIP GRANTS

GRANT PERIOD: 2018–2023

THE YOUNG CHILD AND PARENT PROJECT

LEAD AGENCY: Health Federation of Philadelphia

LOCATION: Philadelphia, Pennsylvania

TARGET SERVICE AREA: Philadelphia and Bucks Counties

ADMINISTRATION FOR CHILDREN AND FAMILIES REGION: 3

CONGRESSIONAL DISTRICT SERVED: PA-001

BRIEF PROGRAM DESCRIPTION

PROGRAM DESCRIPTION: The Health Federation of Philadelphia (HFP) is implementing the Young Child and Parent Project (YCP). Building on critical systems and clinical lessons learned from implementation and evaluation of a Round 2 Regional Partnership Grant (RPG), HFP is aligning with substance use disorder (SUD) treatment programs and focusing on building maternal capacity for reflective functioning. This is accomplished by testing the efficacy of fully integrating program services through staff co-location within the treatment programs, and offering the following interventions: Mothering from the Inside Out (MIO), an evidence-based model that has successfully helped mothers in SUD treatment develop capacity for reflective functioning, along with Child-Parent Psychotherapy (CPP), a dyadic and relationship-based treatment model, with an array of types of SUD treatment programs that serve women and children in two counties.

The project also focuses on increasing comprehensive family treatment opportunities, enrollment, and retention in SUD treatment programs and improving the overall system of services for young children affected by parental SUDs. This is accomplished by strengthening existing partnerships and interagency collaboration and closing the gap between promising collaborative processes that exist and barriers that impede their full execution.

TARGET POPULATION: The target population is parents and their children in utero through age 5 who are at risk of or in out-of-home placement in Philadelphia and Bucks Counties due to their parents' SUD.

PROJECTED NUMBERS SERVED: The program will serve 113 mother/child dyads in the treatment group and 57 mother/child dyads in the control group.

MAJOR PROGRAM GOAL

GOAL: To improve the well-being, permanency, and safety outcomes for young children who are at risk of or in out-of-home placement in Philadelphia and Bucks Counties and affected by pre- and post-natal maternal substance use.

KEY PROGRAM SERVICES

- Mothering from the Inside Out
- Child-Parent Psychotherapy
- Infant Toddler Sensory Profile
- Keys to Interactive Parenting Scale

PARTNER AGENCIES AND ORGANIZATIONS

- Amanda Lowell, Ph.D., Yale University Child Study Center – MIO training and consultation
- Bucks County Behavioral Health
- Bucks County Human Services

- Community Legal Services of Philadelphia
- Court of Common Pleas of Bucks County
- Drexel University Caring Together
- Interim House West
- Libertae, Inc.
- Mt. Hope Family Center – CPP Consultants
- PolicyLab at the Children’s Hospital of Philadelphia
- Philadelphia Department of Human Services
- Philadelphia Department of Behavioral Health and Intellectual Disability Services
- Support Center for Child Advocates
- The Family Court of Philadelphia

EVALUATION DESIGN

The grantee’s local evaluation has three components: an impact study, an implementation study, and a collaboration study. The grantee is also participating in the RPG cross-site evaluation studies of family and child outcomes, program implementation, and collaboration among RPG grantees and partners.

IMPACT STUDY DESIGN

The grantee uses a Randomized Control Trial design to examine the impact of RPG services on pregnant or parenting mothers involved with one of four outpatient or residential SUD treatment programs and their children (in utero to age 5). Members of the program group receive two integrated interventions: MIO and CPP. Members of the comparison group receive only CPP. RPG services last 9 months. The impact study includes 170 mother/child dyads, with 113 in the program group and 57 in the comparison group. The grantee examines impacts in the following domains: permanency, safety, child well-being, family functioning, and recovery.

Data sources include administrative data and information collected by data collectors using standardized instruments. Evaluation staff conduct data collection with standardized instruments for both the program and comparison groups. Data are collected several times for each family: (1) when families begin services (at baseline), (2) 9 months after baseline (at the end of services), and (3) at 3 and 6 months after baseline for three of the standardized instruments.

IMPLEMENTATION STUDY DESIGN

In the implementation study, the grantee examines parent satisfaction; engagement and participation of families; program service implementation practices and fidelity; provider knowledge of the program intervention, comfort with the program intervention dyadic treatment model, and capacity for using reflective supervision and training; implementation barriers and successes; and stakeholder and partner satisfaction with the project and dissemination materials.

Data sources include parent surveys, program attendance records, fidelity checklists, observations of parent-child interactions, and surveys and key informant interviews with program partners.

COLLABORATION STUDY DESIGN

In the collaboration study, the grantee examines integration of RPG services with substance use program services, regional partnerships, and development of regional partnership goals related to program model expansion and sustainability and demonstrated model expansion and sustainability. Data sources include surveys and key informant interviews with program partners.

SUSTAINABILITY STRATEGIES AND ACTIVITIES

The sustainability strategy is multifaceted. To sustain the clinical interventions, the project will demonstrate the efficacy of the MIO-CPP combined intervention and the essential elements of its implementation. Through the involvement of Community Behavioral Health (CBH) in the development, implementation, and evaluation of this project, and through the ongoing feedback and advocacy of the Cross-systems Steering Committee, it is expected that CBH, the major funder of clinical behavioral services in Philadelphia County, will expand its support through dissemination, training, and payment for MIO-CPP clinical services within its current and/or expanded network of providers. Currently, CBH is funding limited CPP services for YCP to initiate its work in SUD treatment programs for women and children in Philadelphia, and Bucks County has diverted prevention funds as a way to start up initial implementation.

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